

UNITED STATES DISTRICT COURT

for the
Southern District of IllinoisEarl Michael MorlanCase Number: 21-1021-JPG
(Clerk's Office will provide)

Plaintiff(s)/Petitioner(s)

v.

Advanced Correctional HealthCare FMC,
Nurse Danielle
Dr. Lockheart

Defendant(s)/Respondent(s)

☒ CIVIL RIGHTS COMPLAINT

pursuant to 42 U.S.C. §1983 (State Prisoner)

☐ CIVIL RIGHTS COMPLAINT

pursuant to 28 U.S.C. §1331 (Federal Prisoner)

☐ CIVIL COMPLAINTpursuant to the Federal Tort Claims Act, 28 U.S.C.
§§1346, 2671-2680, or other law

I. JURISDICTION

Plaintiff: Earl M. MorlanA. Plaintiff's mailing address, register number, and present place of
confinement. 204 W. Washington St Salem IL 62881
Reg no: 210627147428
Marion County Law Enforcement Center.

Defendant #1:

B. Defendant Advanced Correctional HealthCare FMC, is employed as
(a) (Name of First Defendant)Medical Provider / Contractual Service
(b) (Position/Title)with Marion County Law Enforcement Center.
(c) (Employer's Name and Address)3922 W. Baring Trace Peoria, IL 61615At the time the claim(s) alleged this complaint arose, was Defendant #1
employed by the state, local, or federal government? ☒ Yes ☐ NoIf your answer is YES, briefly explain: They are contracted for medical
care through Marion County IL.

Defendant #2:

C. Defendant Nurse Danielle ? is employed as

(Name of Second Defendant)

Registered Nurse

(Position/Title)

with Advanced Correctional Healthcare Inc. Through Marlen
(Employer's Name and Address)

County Law Enforcement Center at 204 W. Washington St Salem IL 62881

At the time the claim(s) alleged in this complaint arose, was Defendant #2
employed by the state, local, or federal government? ☒ Yes ☐ No

If you answer is YES, briefly explain:

She is a Contracted Nurse for inmate Health care at
The Marlen County Jail in Salem IL.

Additional Defendant(s) (if any):

D. Using the outline set forth above, identify any additional Defendant(s).

Defendant Dr. Lockheart is employed as a physician
with Advanced Correctional Healthcare Inc. Through Marlen
County Law Enforcement Center at 204 W. Washington St Salem
IL 62881. This Defendant was employed Through Local
Government as a Contractual Health Care Provider.

II. PREVIOUS LAWSUITS

A. Have you begun any other lawsuits in state or federal court while you were in prison or jail (during either your current or a previous time in prison or jail), e.g., civil actions brought under 42 U.S.C. § 1983 (state prisoner), 28 U.S.C. § 1331 (federal prisoner), 28 U.S.C. §§ 1346, 2671-2680, or other law? ☐ Yes ☒ No

B. If your answer to "A" is YES, describe each lawsuit in the space below. If there is more than one lawsuit, you must describe the additional lawsuits on another sheet of paper using the same outline. List ALL lawsuits in any jurisdiction and indicate the court where they were filed to the best of your ability, including those that resulted in the assessment of a "strike" under 28 U.S.C. § 1915(g) and/or those that were dismissed for being frivolous, malicious, or for failure to state a claim (see 28 U.S.C. § 1915A; 28 U.S.C. § 1915(e)(2); Federal Rule of Civil Procedure 12(b)(6)). FAILURE TO FULLY DISCLOSE YOUR LITIGATION HISTORY, INCLUDING "STRIKES," MAY RESULT IN SANCTIONS THAT INCLUDE DISMISSAL OF THIS ACTION.

1. Parties to previous lawsuits:
Plaintiff(s):

Defendant(s):

2. Court (if federal court, name of the district; if state court, name of the county):

3. Docket number:

4. Name of Judge to whom case was assigned:

5. Type of case (for example: Was it a habeas corpus or civil rights action?):

6. Disposition of case (for example: Was the case dismissed? Was it appealed? Is it still pending?):

7. Approximate date of filing lawsuit:
8. Approximate date of disposition:
9. Was the case dismissed as being frivolous, malicious, or for failure to state a claim upon which relief may be granted and/or did the court tell you that you received a "strike?"

III. GRIEVANCE PROCEDURE

- A. Is there a prisoner grievance procedure in the institution? ☒ Yes ☐ No
- B. Did you present the facts relating to your complaint in the prisoner grievance procedure? ☐ Yes ☒ No
- C. If your answer is YES,
 1. What steps did you take?
 2. What was the result?
- D. If your answer is NO, explain why not.

The Grievance procedures do not apply to medical as they are a contracted service and the Jail Admin has no oversight into their policies and/or procedures.
- E. If there is no prisoner grievance procedure in the institution, did you complain to prison authorities? ☒ Yes ☐ No
- F. If your answer is YES,
 1. What steps did you take?

Emergency medical protocols in which guards fill out emergency forms to be forwarded to medical

2. What was the result?

Nothing but useless Sick call Charges to my account

G. If your answer is NO, explain why not.

H. Attach copies of your request for an administrative remedy and any response you received. If you cannot do so, explain why not:

IV. STATEMENT OF CLAIM

A. State here, as briefly as possible, when, where, how, and by whom you feel your constitutional rights were violated. Do not include legal arguments or citations. If you wish to present legal arguments or citations, file a separate memorandum of law. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. If your claims relate to prison disciplinary proceedings, attach copies of the disciplinary charges and any disciplinary hearing summary as exhibits. You should also attach any relevant, supporting documentation.

- On or about December of 2020 I had a heart attack at the time I was not confined. I had a Stent placed in my heart.

- On or about February of 2021 I had a subsequent heart attack.

- On May 23 I was Confined at the Marion County Law Enforcement Center.

- On June 4, 2021 I was seen by Nurse Danville for my intake medical screening. In which I provided an abundance of information regarding my Cardiology history as well as a list of my current medications which were provided to the Jail authorities via Prop. off by my son.

- On or about June 3, 2021 I experienced chest pain, requested an emergency protocol and subsequently was taken by ambulance to Salem's emergency room where I was treated. Upon Discharge it was recommended that I see a cardiologist for follow up.

- Upon my return to the Jail I was never seen for follow up by the Jail's Physician Dr. Lock Heart or a cardiologist. I was told by Nurse Danville no follow up was needed.

- about (2) two weeks later I again experienced chest pains and asked for emergency protocol and was taken by ambulance to Salem's E.R. and again was treated and upon Discharge it was again recommended to see a cardiologist.

- Again I was never seen for follow up by Dr. Lock Heart or a cardiologist completely and deliberately indifferent to my medical needs.

- about (2) two weeks later I experienced chest pains did protocols all over again and was taken by Jail authorities that following morning to the E.R. where I was again recommended to see a cardiologist.

- I was finally seen by Dr. Lock Heart who in turn did absolutely nothing Rev. 10/3/19 and denied my request to see a cardiologist.

V. REQUEST FOR RELIEF

State exactly what you want this court to do for you. If you are a state or federal prisoner and seek relief which affects the fact or duration of your imprisonment (for example: illegal detention, restoration of good time, expungement of records, or parole), you must file your claim on a habeas corpus form, pursuant to 28 U.S.C. §§ 2241, 2254, or 2255. Copies of these forms are available from the clerk's office.

monetary relief for actual damages: \$200,000.00

• Punitive damages: \$5,000,000.00

• Pain & Suffering: \$500,000.00

• Deliberate indifference: \$2,500,000.00

• Any other relief this court deems just/reasonable.

VI. JURY DEMAND (check one box below)

The plaintiff ☒ does ☐ does not request a trial by jury.

DECLARATION UNDER FEDERAL RULE OF CIVIL PROCEDURE 11

I certify to the best of my knowledge, information, and belief, that this complaint is in full compliance with Rule 11(a) and 11(b) of the Federal Rules of Civil Procedure. The undersigned also recognizes that failure to comply with Rule 11 may result in sanctions.

Signed
on:

August-15-2021
(date)

Earl M Morlan

Signature of Plaintiff

204 N. Washington

Street Address

Earl M Morlan

Printed Name

Salem FL 32881

City, State, Zip

2106-2714-7428

Prisoner Register Number

Signature of Attorney (if any)

August 15, 2021

United States Circuit Clerk
750 Missouri Ave
East St. Louis IL 62201

RE: Filing of 42 USC 1983

Dear Circuit clerk,

I hope you are well. Please find enclosed
a 42 USC 1983 packet. Can you please file this
for me?

Can you please also send me any other
forms needed to complete this filing.

Thanks for your time.

Respectfully,
Earl M. Morlan

Earl M. Morlan
204 W. Washington St.
Salem IL 62551

Earl M
104 N Washington
Salem IL 62881



UNITED STATES
US MAIL PERMITS

Circuit Clerk for the
United States District Court
for the Southern District of Illinois
East St. Louis Division
750 Missouri Ave.
East St. Louis, Illinois 62201

Legal MAIL



RECEIVED

AUG 18 2021

CLERK, U.S. DISTRICT COURT
SOUTHERN DISTRICT OF ILLINOIS
EAST ST. LOUIS OFFICE